

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from  
John Doe dba Doe's Limo

BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2009 - 460 - T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was Assigned and should be entered above.

(Please type or print)

Submitted by:

Henry D. Wolfe

Address:

1806 Wedgefield Dr.  
Charleston, SC 29407

Telephone:

(843) 609-5039

Fax:

Other:

Email:

wolfeorga@yahoo.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- ☒ Application - Class C Taxi
- ☐ Application - Class C Charter
- ☐ Application - Class C Charter Bus
- ☐ Application - Class C Non-Emergency
- ☐ Application - Class E Household Goods
- ☐ Application - Class E Hazardous Waste
- ☐ Application
- ☐ Request for Extension to Comply with Order
- ☐ Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded
- ☐ Request for Cancellation of Certificate
- ☐ Request for Suspension
- ☐ Request for Reinstatement
- ☐ Request for Name Change on Certificate

- ☐ Request to Amend Scope of Authority
- ☐ Request to Amend Tariff (rate increase, etc.)
- ☐ Request to Amend Passenger Limit
- ☐ Request
- ☐ Exhibit
- ☐ Late-Filed Exhibit
- ☐ Letter
- ☐ Proposed Order
- ☐ Publisher's Affidavit
- ☐ Reservation Letter
- ☐ Response
- ☐ Return to Petition
- ☐ Other: \_\_\_\_\_

RECEIVED  
SEP 22 2009  
PSC SC  
DOCKETING DEPT.

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA  
ATTN: DOCKETING DEPARTMENT  
101 EXECUTIVE CENTER DRIVE  
COLUMBIA, SOUTH CAROLINA 29210  
(Mailing address: Post Office Box 11649, Columbia, SC 29211)  
Office # (803) 896-5100 - Fax # (803) 896-5199

DATE 9-18 - , 2009

CLASS C - TAXI

**APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY  
FOR OPERATION OF MOTOR VEHICLE CARRIER**

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

Elite Taxi Services by Henry D Walke dba

2. (a) Street Address of Applicant 1806 Wedgefield Dr, Charleston, SC  
29407

(b) Mailing address, if different from street address \_\_\_\_\_

(c) Telephone Number (843) 609-5039

3. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of S.C., need S.C. Secretary of State "Foreign Corporation" Certificate.)

4. (a) If a partnership, names and addresses of all persons having an interest in the business. (b) If a corporation, names and addresses of two principal officers will be sufficient.

5. The proposed service to be provided and the proposed rates and charges for such service, per Exhibit "C" included herewith.

6. The proposed list of equipment is as per Exhibit "D" included herewith.

1. Applicant is financially able to furnish the services as specified in this Application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance at Time Application is Filed:  
Month: September Year: 2009

Assets:	
Cash	\$200.00
Receivables	\$100.00
Real Estate	0
Buildings and Equipment-Net	0
Motor Vehicles-Net	\$3,200.00
Garage Equipment-Net	0
Machinery and Tools-Net	0
Supplies on Hand	0
Prepays and Other Assets	0
Total Assets	\$3,500.00

Liabilities and Equity:	
Accounts Payable	0
Notes Payable	0
Mortgages Payable	0
Equipment Obligations	0
Accrued Salaries and Wages	0
Other Accrued Obligations	0
Other Liabilities	0
Total Liabilities	0
Capital Stock	0
Retained Earnings	0
Total Equity	\$3,500
Total Liabilities and Equity	\$3,500

8. Applicant is familiar with the provision of S.C. Code Ann., §58-23-10, et seq. (1976), and amendments thereto, and R.103- through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-40 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol. 23A, S.C. Code Ann., 1976) and all thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA,

COUNTY OF Charleston

I, Henry D. Wolfe  
(Name of Applicant's Representative)  
of Elite Taxi Service  
Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above Application are true and correct.

Manager/Owner  
(Title)

SWORN TO BEFORE ME

This the 18 day of September 2009  
Kellie R. Poole  
(Notary Public)

Commission Expires: Nov, 21, 2015

Henry D. Wolfe  
(Signature of Applicant's Representative)

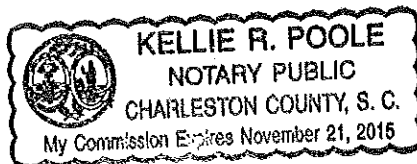


EXHIBIT C

CLASS C

TAXI \_\_\_\_\_

CHARTER \_\_\_\_\_

**PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA**

Columbia, South Carolina

Applicant Henry D Wolfe

For the transportation of passengers as follows:

Area to be served: Charleston, SC and Rest of S.C.

Number of passengers: 6

Fares: ~~per~~ Meter calculates fares range from \$4.00 up to \$100

Date 9-18-09

Henry D. Wolfe  
Applicant

Manager/Owner  
Title

Rev.10/03

EXHIBIT D

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

DESCRIPTION OF EQUIPMENT

YEAR	MODEL & MAKE	VIN #	EMPTY WEIGHT	CARRYING CAPACITY *
2000	Ford Winstar Van	2FMZA547YB105775	4000 lbs.	8 passengers
1998	Dodge Caravan	1B77AVGHI20632801	3500 lbs.	8 passengers

\* Seats if passenger carrier.

Date: 7-18-09

Henry D. Doyle / Elite Taxi Services  
(Applicant)

Henry Doyle  
(Applicant's Representative)

Manager/Owner  
(Title)

## INSURANCE QUOTE

The following insurance quote is for:

Elite Taxi Services By Henry D Workup  
(Name of Motor Carrier)

1806 Wedgefield Rd Charleston, SC 29407  
(Address of Motor Carrier)

### Amount of Premium:

Liability Insurance 5800.00 2 vehicles

The above quoted premium is for a term of 12 months.

### Minimum Limits - Intrastate Only:

1 - 7 passengers	-	25,000/50,000/25,000
8 - 15 passengers	-	25,000/100,000/25,000

Southern United Fire Ins Co  
(Insurance Company Name)

1245 Celebration Blvd Florence, SC 29501  
(Home Office Address of Company)

is familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

9-10-2009  
Date

Jerry L Parton 843-407-4090  
(Authorized Insurance Company Representative)

Rev 5/07

FORM C-AC

Personal Identification Information

**Name of Applicant:** Henry D. Waite

**Address:** 1806 Wedge Field, Charleston, SC 29407

**Federal Employer Identification Number:** \_\_\_\_\_

\*\*\*\*\* Confidential \*\*\*\*\*

**For Internal Use Only**